

Fill in this information to identify the case:

United States Bankruptcy Court for the:

Southern District of Texas, Houston Division

Case number (if known): _____ Chapter 11☐ Check if this is an amended filing

Official Form 201

Voluntary Petition for Non-Individuals Filing for Bankruptcy

04/19

If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write the debtor's name and the case number (if known). For more information, a separate document, *Instructions for Bankruptcy Forms for Non-Individuals*, is available.

1. Debtor's name Compression Generation Services, LLC

2. All other names debtor used in the last 8 years

Include any assumed names, trade names, and *doing business as* names

3. Debtor's federal Employer Identification Number (EIN) 4 5 - 3 1 4 1 1 8 3

4. Debtor's address

Principal place of business

14440 Smith Road

Number Street

Humble, TX 77396

City State ZIP Code

Harris

County

Mailing address, if different from principal place of business

Number Street

P.O. Box

City State ZIP Code

Location of principal assets, if different from principal place of business

Number Street

City State ZIP Code

5. Debtor's website (URL) _____

6. Type of debtor

☒ Corporation (including Limited Liability Company (LLC) and Limited Liability Partnership (LLP))☐ Partnership (excluding LLP)☐ Other. Specify: _____

7. Describe debtor's business**A. Check one:**

- ☐ Health Care Business (as defined in 11 U.S.C. § 101(27A))
- ☐ Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B))
- ☐ Railroad (as defined in 11 U.S.C. § 101(44))
- ☐ Stockbroker (as defined in 11 U.S.C. § 101(53A))
- ☐ Commodity Broker (as defined in 11 U.S.C. § 101(6))
- ☐ Clearing Bank (as defined in 11 U.S.C. § 781(3))
- ☒ None of the above

B. Check all that apply:

- ☐ Tax-exempt entity (as described in 26 U.S.C. § 501)
- ☐ Investment company, including hedge fund or pooled investment vehicle (as defined in 15 U.S.C. § 80a-3)
- ☐ Investment advisor (as defined in 15 U.S.C. § 80b-2(a)(11))

C. NAICS (North American Industry Classification System) 4-digit code that best describes debtor. See <http://www.uscourts.gov/four-digit-national-association-naics-codes>.

— 2 — 2 — 1 —

8. Under which chapter of the Bankruptcy Code is the debtor filing?**Check one:**

- ☐ Chapter 7
- ☐ Chapter 9
- ☒ Chapter 11. **Check all that apply:**

- ☐ Debtor's aggregate noncontingent liquidated debts (excluding debts owed to insiders or affiliates) are less than \$2,725,625 (amount subject to adjustment on 4/01/22 and every 3 years after that).
- ☒ The debtor is a small business debtor as defined in 11 U.S.C. § 101(51D). If the debtor is a small business debtor, attach the most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return or if all of these documents do not exist, follow the procedure in 11 U.S.C. § 1116(1)(B).
- ☐ A plan is being filed with this petition.
- ☐ Acceptances of the plan were solicited prepetition from one or more classes of creditors, in accordance with 11 U.S.C. § 1126(b).
- ☐ The debtor is required to file periodic reports (for example, 10K and 10Q) with the Securities and Exchange Commission according to § 13 or 15(d) of the Securities Exchange Act of 1934. File the *Attachment to Voluntary Petition for Non-Individuals Filing for Bankruptcy under Chapter 11* (Official Form 201A) with this form.
- ☐ The debtor is a shell company as defined in the Securities Exchange Act of 1934 Rule 12b-2.

☐ Chapter 12**9. Were prior bankruptcy cases filed by or against the debtor within the last 8 years?**☒ No☐ Yes. District _____ When _____ Case number _____
MM / DD / YYYY

If more than 2 cases, attach a separate list.

District _____ When _____ Case number _____
MM / DD / YYYY**10. Are any bankruptcy cases pending or being filed by a business partner or an affiliate of the debtor?**☒ No☐ Yes. Debtor _____ Relationship _____
District _____ When _____

List all cases. If more than 1, attach a separate list.

Case number, if known _____
MM / DD / YYYY

11. Why is the case filed in this district?*Check all that apply:*

- ☒ Debtor has had its domicile, principal place of business, or principal assets in this district for 180 days immediately preceding the date of this petition or for a longer part of such 180 days than in any other district.
- ☐ A bankruptcy case concerning debtor's affiliate, general partner, or partnership is pending in this district.

12. Does the debtor own or have possession of any real property or personal property that needs immediate attention?☒ No☐ Yes. Answer below for each property that needs immediate attention. Attach additional sheets if needed.**Why does the property need immediate attention? (Check all that apply.)**☐ It poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety.What is the hazard?
_____☐ It needs to be physically secured or protected from the weather.☐ It includes perishable goods or assets that could quickly deteriorate or lose value without attention (for example, livestock, seasonal goods, meat, dairy, produce, or securities-related assets or other options).☐ Other _____**Where is the property?**

Number _____ Street _____

City _____

State _____

ZIP Code _____

Is the property insured?☐ No

☐ Yes. Insurance agency _____

Contact name _____

Phone _____

Statistical and administrative information**13. Debtor's estimation of available funds?***Check one:*

- ☐ Funds will be available for distribution to unsecured creditors.
- ☒ After any administrative expenses are paid, no funds will be available for distribution to unsecured creditors.

14. Estimated number of creditors

- ☐ 1-49 ☐ 50-99 ☐ 1,000-5,000 ☐ 25,001-50,000
- ☒ 100-199 ☐ 200-999 ☐ 5,001-10,000 ☐ 50,000-100,000
- ☐ 10,001-25,000 ☐ More than 100,000

15. Estimated assets

- ☒ \$0-\$50,000 ☐ \$1,000,001-\$10 million ☐ \$500,000,001-\$1 billion
- ☐ \$50,001-\$100,000 ☐ \$10,000,001-\$50 million ☐ \$1,000,000,001-\$10 billion
- ☐ \$100,001-\$500,000 ☐ \$50,000,001-\$100 million ☐ \$10,000,000,001-\$50 billion
- ☐ \$500,001-\$1 million ☐ \$100,000,001-\$500 million ☐ More than \$50 billion

16. Estimated liabilities

- | | | |
|--|---|--|
| <input type="checkbox"/> \$0-\$50,000 | <input type="checkbox"/> \$1,000,001-\$10 million | <input type="checkbox"/> \$500,000,001-\$1 billion |
| <input type="checkbox"/> \$50,001-\$100,000 | <input checked="" type="checkbox"/> \$10,000,001-\$50 million | <input type="checkbox"/> \$1,000,000,001-\$10 billion |
| <input type="checkbox"/> \$100,001-\$500,000 | <input type="checkbox"/> \$50,000,001-\$100 million | <input type="checkbox"/> \$10,000,000,001-\$50 billion |
| <input type="checkbox"/> \$500,001-\$1 million | <input type="checkbox"/> \$100,000,001-\$500 million | <input type="checkbox"/> More than \$50 billion |

Request for Relief, Declaration, and Signatures

WARNING -- Bankruptcy fraud is a serious crime. Making a false statement in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

17. Declaration and signature of authorized representative of debtor

- ☐ The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this petition.
- ☐ I have been authorized to file this petition on behalf of the debtor.
- ☐ I have examined the information in this petition and have a reasonable belief that the information is true and correct.

I declare under penalty of perjury that the foregoing is true and correct.

Executed on 07/03/2019
MM/ DD/ YYYY

X

/s/ John Peter Pauk
Signature of authorized representative of debtor

John Peter Pauk
Printed name

Title President

18. Signature of attorney**X**

/s/ Jessica Hoff
Signature of attorney for debtor

Date 07/03/2019
MM/ DD/ YYYY

Jessica Hoff
Printed name

Hoff Law Offices, P.C.
Firm name

1322 Space Park Drive
Number Street

Houston
City

TX
State

77058
ZIP Code

Contact phone

jhoff@hofflawoffices.com
Email address

24093963
Bar number

TX
State

[If debtor is required to file periodic reports (e.g., forms 10K and 10Q) with the Securities and Exchange Commission pursuant to Section 13 or 15(d) of the Securities Exchange Act of 1934 and is requesting relief under chapter 11 of the Bankruptcy Code, this Exhibit "A" shall be completed and attached to the petition.]

[Caption as in Form 416B]

**Attachment to Voluntary Petition for Non-Individuals Filing for
Bankruptcy under Chapter 11**

1. If any of the debtor's securities are registered under Section 12 of the Securities Exchange Act of 1934, the SEC file number is .

2. The following financial data is the latest available information and refers to the debtor's condition on .

a. Total assets	\$0.00
b. Total debts (including debts listed in 2.c., below)	\$24,010,585.98
c. Debt securities held by more than 500 holders	

Approximate
number of
holders:

secured <input type="checkbox"/>	unsecured <input type="checkbox"/>	subordinated <input type="checkbox"/>
secured <input type="checkbox"/>	unsecured <input type="checkbox"/>	subordinated <input type="checkbox"/>
secured <input type="checkbox"/>	unsecured <input type="checkbox"/>	subordinated <input type="checkbox"/>
secured <input type="checkbox"/>	unsecured <input type="checkbox"/>	subordinated <input type="checkbox"/>
secured <input type="checkbox"/>	unsecured <input type="checkbox"/>	subordinated <input type="checkbox"/>

d. Number of shares of preferred stock	0
e. Number of shares common stock	0

Comments, if any:

3. Brief description of debtor's business Power Generation and Gas Compression

4. List the names of any person who directly or indirectly owns, controls, or holds, with power to vote, 5% or more of the voting securities of debtor:

Fill in this information to identify the case:

Debtor name Compression Generation Services, LLCUnited States Bankruptcy Court for the:
Southern District of Texas, Houston Division

Case number (if known): _____

☐ Check if this is an
amended filing**Official Form 202****Declaration Under Penalty of Perjury for Non-Individual Debtors****12/15**

An individual who is authorized to act on behalf of a non-individual debtor, such as a corporation or partnership, must sign and submit this form for the schedules of assets and liabilities, any other document that requires a declaration that is not included in the document, and any amendments of those documents. This form must state the individual's position or relationship to the debtor, the identity of the document, and the date. Bankruptcy Rules 1008 and 9011.

WARNING – Bankruptcy fraud is a serious crime. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Declaration and signature

I am the president, another officer, or an authorized agent of the corporation; a member or an authorized agent of the partnership; or another individual serving as a representative of the debtor in this case.

I have examined the information in the documents checked below and I have a reasonable belief that the information is true and correct:

- ☐ *Schedule A/B: Assets—Real and Personal Property* (Official Form 206A/B)
- ☐ *Schedule D: Creditors Who Have Claims Secured by Property* (Official Form 206D)
- ☐ *Schedule E/F: Creditors Who Have Unsecured Claims* (Official Form 206E/F)
- ☐ *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G)
- ☐ *Schedule H: Codebtors* (Official Form 206H)
- ☐ *A Summary of Assets and Liabilities for Non-Individuals* (Official Form 206A-Summary)
- ☐ *Amended Schedule* _____
- ☐ *Chapter 11 or Chapter 9 Cases: List of Creditors Who Have the 20 Largest Unsecured Claims and Are Not Insiders* (Official Form 204)
- ☐ Other document that requires a declaration _____

I declare under penalty of perjury that the foregoing is true and correct.

Executed on 07/03/2019
MM/ DD/ YYYY**X**/s/ John Peter Pauk

Signature of individual signing on behalf of debtor

John Peter Pauk
Printed namePresident
Position or relationship to debtor

Fill in this information to identify the case:

Debtor name Compression Generation Services, LLC

United States Bankruptcy Court for the:

Southern District of Texas, Houston Division

Case number (if known): _____

☐ Check if this is an amended filing

Official Form 206D

Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible.

1. Do any creditors have claims secured by debtor's property?

☐ No. Check this box and submit page 1 of this form to the court with debtor's other schedules. Debtor has nothing else to report on this form.☒ Yes. Fill in all of the information below.

Part 1: List Creditors Who Have Secured Claims

2. List in alphabetical order all creditors who have secured claims. If a creditor has more than one secured claim, list the creditor separately for each claim.

Column A

Amount of claim
Do not deduct the
value of collateral.

Column B

Value of collateral
that supports this
claim

2.1 Creditor's name

Ally Finacial

Describe debtor's property that is subject to a lien

Describe the lien

\$73,553.00\$0.00

Creditor's mailing address

PO Box 9001948Louisville, KY 40290-1948

Creditor's email address, if known

Date debt was incurred

Last 4 digits of account
number

Do multiple creditors have an interest in the same property?

☒ No.☐ Yes. Specify each creditor, including this creditor, and its relative priority.

Is the creditor an insider or related party?

☒ No☐ Yes.

Is anyone else liable on this claim?

☒ No☐ Yes. Fill out *Schedule H: Codebtors* (Official Form 206H).

As of the petition filing date, the claim is:

Check all that apply.

☐ Contingent☐ Unliquidated☐ Disputed

2.2 Creditor's name

Capacity Funding LLC

Describe debtor's property that is subject to a lien

Describe the lien

\$4,020,137.00\$0.00

Creditor's mailing address

7 Renaissance Square 5th FloorWhite Plains, NY 10601

Creditor's email address, if known

Date debt was incurred

Last 4 digits of account
number

Do multiple creditors have an interest in the same property?

☒ No.☐ Yes. Have you already specified the relative priority?

Is the creditor an insider or related party?

☒ No☐ Yes.

Is anyone else liable on this claim?

☒ No☐ Yes. Fill out *Schedule H: Codebtors* (Official Form 206H).

As of the petition filing date, the claim is:

Check all that apply.

☐ Contingent☐ Unliquidated☐ Disputed

3. Total of the dollar amounts from Part 1, Column A, including the amounts from the Additional Page, if any.

\$18,836,198.00

Part 1: Additional Page

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.

Column A

Amount of claim
Do not deduct the
value of collateral.

Column B

**Value of collateral
that supports this
claim****2.3****Creditor's name**

Cool Cow

Describe debtor's property that is subject to a lien

\$175,000.00

\$0.00

Describe the lien**Creditor's mailing address**

28439 Champions Ridge

Magnolia, TX 77354

Is the creditor an insider or related party?☒ No☐ Yes.**Creditor's email address, if known****Is anyone else liable on this claim?**☒ No☐ Yes. Fill out *Schedule H: Codebtors* (Official Form 206H).**Date debt was incurred** _____**Last 4 digits of account
number** _____**As of the petition filing date, the claim is:**

Check all that apply.

☐ Contingent☐ Unliquidated☐ Disputed**Do multiple creditors have an interest in the same
property?**☒ No.☐ Yes. Have you already specified the relative
priority?**2.4****Creditor's name**

Farnam Street Financial

Describe debtor's property that is subject to a lien

\$1,339,004.00

\$0.00

Describe the lien**Creditor's mailing address**

240 Pondview Plaza

5850 Opus Parkway

Hopkins, MN 55343

Is the creditor an insider or related party?☒ No☐ Yes.**Creditor's email address, if known****Is anyone else liable on this claim?**☒ No☐ Yes. Fill out *Schedule H: Codebtors* (Official Form 206H).**Date debt was incurred** _____**Last 4 digits of account
number** _____**As of the petition filing date, the claim is:**

Check all that apply.

☐ Contingent☐ Unliquidated☐ Disputed**Do multiple creditors have an interest in the same
property?**☒ No.☐ Yes. Have you already specified the relative
priority?

Part 1: Additional Page**Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.**

Column A

Amount of claim
Do not deduct the
value of collateral.

Column B

**Value of collateral
that supports this
claim**

2.5 Creditor's name FlowCapital/Grenville Creditor's mailing address 1 Adelaide Street East Suite 3002 Toronto, Ontario, Canada ON M5C 2V9, Creditor's email address, if known Date debt was incurred _____ Last 4 digits of account number _____ Do multiple creditors have an interest in the same property? <input checked="" type="checkbox"/> No. <input type="checkbox"/> Yes. Have you already specified the relative priority?	Describe debtor's property that is subject to a lien Describe the lien _____ Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H). As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$8,648,279.00	\$0.00
2.6 Creditor's name IAH/AIM Corporate Creditor's mailing address 27523 Morton Rd Katy, TX 77493 Creditor's email address, if known Date debt was incurred _____ Last 4 digits of account number _____ Do multiple creditors have an interest in the same property? <input checked="" type="checkbox"/> No. <input type="checkbox"/> Yes. Have you already specified the relative priority?	Describe debtor's property that is subject to a lien Describe the lien _____ Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H). As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$340,000.00	\$0.00

Part 1: Additional Page

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.

Column A

Amount of claim
Do not deduct the
value of collateral.

Column B

**Value of collateral
that supports this
claim**

2.7 Creditor's name Industrial Supply/Dissolvalloy <hr/> Creditor's mailing address 21750 E Martin Drive Porter, TX 77365 <hr/> Creditor's email address, if known <hr/> Date debt was incurred _____ Last 4 digits of account number _____ Do multiple creditors have an interest in the same property? <input checked="" type="checkbox"/> No. <input type="checkbox"/> Yes. Have you already specified the relative priority?	Describe debtor's property that is subject to a lien <hr/> Describe the lien <hr/> Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H). As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$327,500.00	\$0.00
2.8 Creditor's name IRS <hr/> Creditor's mailing address <hr/> Ogden, UT <hr/> Creditor's email address, if known <hr/> Date debt was incurred _____ Last 4 digits of account number _____ Do multiple creditors have an interest in the same property? <input checked="" type="checkbox"/> No. <input type="checkbox"/> Yes. Have you already specified the relative priority?	Describe debtor's property that is subject to a lien <hr/> Describe the lien <hr/> Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H). As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$3,027,220.00	\$0.00

Part 1: Additional Page

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.

Column A

Amount of claim
Do not deduct the
value of collateral.

Column B

**Value of collateral
that supports this
claim****2.9****Creditor's name**

Kabbage

Describe debtor's property that is subject to a lien

\$28,355.00

\$0.00

Creditor's mailing address

PO Box 77081

Atlanta, GA 30357

Describe the lien**Is the creditor an insider or related party?**☒ No☐ Yes.**Creditor's email address, if known****Is anyone else liable on this claim?**☒ No☐ Yes. Fill out *Schedule H: Codebtors* (Official Form 206H).**Date debt was incurred****Last 4 digits of account
number****As of the petition filing date, the claim is:**

Check all that apply.

☐ Contingent☐ Unliquidated☐ Disputed**Do multiple creditors have an interest in the same
property?**☒ No.☐ Yes. Have you already specified the relative
priority?**2.10****Creditor's name**

King Hardy

Describe debtor's property that is subject to a lien

\$25,000.00

\$0.00

Creditor's mailing address

90 Wilson Rd

Humble, TX 77338

Describe the lien**Is the creditor an insider or related party?**☒ No☐ Yes.**Creditor's email address, if known****Is anyone else liable on this claim?**☒ No☐ Yes. Fill out *Schedule H: Codebtors* (Official Form 206H).**Date debt was incurred****Last 4 digits of account
number****As of the petition filing date, the claim is:**

Check all that apply.

☐ Contingent☐ Unliquidated☐ Disputed**Do multiple creditors have an interest in the same
property?**☒ No.☐ Yes. Have you already specified the relative
priority?

Part 1: Additional Page

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.

Column A

Amount of claim
Do not deduct the
value of collateral.

Column B

**Value of collateral
that supports this
claim****2.11****Creditor's name**

Queen Funding LLC

Describe debtor's property that is subject to a lien

\$148,000.00

\$0.00

Describe the lien**Creditor's mailing address**

2221 NE 164 St 1144

North Miami Beach, FL 33160

Is the creditor an insider or related party?☒ No☐ Yes.**Creditor's email address, if known****Is anyone else liable on this claim?**☒ No☐ Yes. Fill out *Schedule H: Codebtors* (Official Form 206H).**Date debt was incurred****Last 4 digits of account
number****As of the petition filing date, the claim is:**

Check all that apply.

☐ Contingent☐ Unliquidated☐ Disputed**Do multiple creditors have an interest in the same
property?**☒ No.☐ Yes. Have you already specified the relative
priority?**2.12****Creditor's name**

React Power Solutions, LLC

Describe debtor's property that is subject to a lien

\$210,000.00

\$0.00

Describe the lien**Creditor's mailing address**

5121 Hilton view Rd

Houston, TX 77086

Is the creditor an insider or related party?☒ No☐ Yes.**Creditor's email address, if known****Is anyone else liable on this claim?**☒ No☐ Yes. Fill out *Schedule H: Codebtors* (Official Form 206H).**Date debt was incurred****Last 4 digits of account
number****As of the petition filing date, the claim is:**

Check all that apply.

☐ Contingent☐ Unliquidated☐ Disputed**Do multiple creditors have an interest in the same
property?**☒ No.☐ Yes. Have you already specified the relative
priority?

Part 1: Additional Page

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.

Column A

Amount of claim

Do not deduct the value of collateral.

Column B

Value of collateral that supports this claim**2.13** **Creditor's name** Describe debtor's property that is subject to a lien

Ven Holdings LLC

\$474,150.00

\$0.00

Describe the lien

Creditor's mailing address

3371 North Sam Houston Pkwy

Houston, TX 77038

Is the creditor an insider or related party?☒ No☐ Yes.**Creditor's email address, if known****Is anyone else liable on this claim?**☒ No☐ Yes. Fill out *Schedule H: Codebtors* (Official Form 206H).**Date debt was incurred** _____**Last 4 digits of account number** _____**As of the petition filing date, the claim is:**

Check all that apply.

☐ Contingent☐ Unliquidated☐ Disputed**Do multiple creditors have an interest in the same property?**☒ No.☐ Yes. Have you already specified the relative priority?

Part 2:
List Others to Be Notified for a Debt Already Listed in Part 1

List in alphabetical order any others who must be notified for a debt already listed in Part 1. Examples of entities that may be listed are collection agencies, assignees of claims listed above, and attorneys for secured creditors.

If no others need to be notified for the debts listed in Part 1, do not fill out or submit this page. If additional pages are needed, copy this page.

Name and address	On which line in Part 1 did you enter the related creditor?	Last 4 digits of account number for this entity
<div>Stinson Leonard Street LLP</div> <div>50 South Sixth Street Suite 2600</div> <div>Minneapolis, MN 55402</div>	Line 2.4	<div></div> <div></div> <div></div> <div></div>
<div>Shackleford, Bowen, McKinley & Norton, LLP</div> <div>9201 N. Central Expressway 4th Floor</div> <div>Dallas, TX 75231</div>	Line 2.5	<div></div> <div></div> <div></div> <div></div>
<div>Internal Revenue Service</div> <div>Centralized Insolvency Operations</div> <div>PO Box 7346</div> <div>Philadelphia, PA 19101-7346</div>	Line 2.8	<div></div> <div></div> <div></div> <div></div>

Fill in this information to identify the case:

Debtor name Compression Generation Services, LLC

United States Bankruptcy Court for the:

Southern District of Texas, Houston Division

Case number (if known): _____

☐ Check if this is an amended filing

Official Form 206E/F

Schedule E/F: Creditors Who Have Unsecured Claims

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY unsecured claims and Part 2 for creditors with NONPRIORITY unsecured claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on *Schedule A/B: Assets - Real and Personal Property* (Official Form 206A/B) and on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G). Number the entries in Parts 1 and 2 in the boxes on the left. If more space is needed for Part 1 or Part 2, fill out and attach the Additional Page of that Part included in this form.

Part 1: List All Creditors with PRIORITY Unsecured Claims

1. Do any creditors have priority unsecured claims? (See 11 U.S.C. § 507)

☐ No. Go to Part 2.☒ Yes. Go to line 2.

2. List in alphabetical order all creditors who have unsecured claims that are entitled to priority in whole or in part. If the debtor has more than 3 creditors with priority unsecured claims, fill out and attach the Additional Page of Part 1.

		Total claim	Priority amount	
2	Priority creditor's name and mailing address <u>Comptroler of Public Accounts</u> <u>P O Box 149354</u> <u>Austin, TX 78714-9354</u> Date or dates debt was incurred Last 4 digits of account number ____ ____ ____ ____ Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) <u>(8)</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the Claim: Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$29,152.95</u>	<u>unknown</u>
2.1	Priority creditor's name and mailing address <u>Hoff Law Offices, P.C.</u> <u>1322 Space Park Drive B-128</u> <u>Houston, TX 77058</u> Date or dates debt was incurred Last 4 digits of account number ____ ____ ____ ____ Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the Claim: Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$0.00</u>	<u>\$0.00</u>

Part 2: List All Creditors with NONPRIORITY Unsecured Claims

3. List in alphabetical order all of the creditors with nonpriority unsecured claims. If the debtor has more than 6 creditors with nonpriority unsecured claims, fill out and attach the Additional Page of Part 2.

Amount of claim

3.1 Nonpriority creditor's name and mailing address <u>3D Network Solutions</u> <u>P O Box 821113</u> <u>Humble, TX 77396</u> Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <u>\$730.47</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes
3.2 Nonpriority creditor's name and mailing address <u>A.M.M.R. S-Advanced Machine</u> <u>1441 Luthe Road 106</u> <u>Houston, TX 77039</u> Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <u>\$2,291.31</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.3 Nonpriority creditor's name and mailing address <u>AC ARS OPER</u> <u>P O BOX 2634</u> <u>Cypress, TX 77410</u> Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <u>\$3,300.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.4 Nonpriority creditor's name and mailing address <u>Accutrol Exterminating</u> <u>11842 Plum Meadow Lane</u> <u>Houston, TX 77039</u> Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <u>\$124.49</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.5 Nonpriority creditor's name and mailing address <u>ACI Services</u> <u>125 Steubenville Avenue</u> <u>Cambridge, OH 43725</u> Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <u>\$21,789.17</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

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3.6	Nonpriority creditor's name and mailing address Action Supply <hr/> 5513 Nomentis <hr/> Houston, TX 77039 <hr/> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <u>\$1,456.95</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.7	Nonpriority creditor's name and mailing address Alfa Laval <hr/> 5400 International Trade Drive <hr/> Henrico, VA 23231 <hr/> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <u>\$9,155.89</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.8	Nonpriority creditor's name and mailing address American Welding & Gas Inc. <hr/> 9 <hr/> 4900 Falls of Neuse Rd. Suite 150 <hr/> Raleigh, NC 27609 <hr/> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <u>\$1,122.79</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.9	Nonpriority creditor's name and mailing address Ample Comp <hr/> 1929 - 65 Street NW <hr/> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <u>\$10,097.62</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.10	Nonpriority creditor's name and mailing address Apache Oil <hr/> P O Box 177 <hr/> Pasadena, TX 77501 <hr/> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <u>\$2,403.92</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

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3.11	Nonpriority creditor's name and mailing address Applied In 10633 W. Little York 250 Houston, TX 77041 Date or dates debt was incurred _____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <u>\$5,865.93</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.12	Nonpriority creditor's name and mailing address Archrock Services 9807 Katy Freeway Suite 100 Houston, TX 77024 Date or dates debt was incurred _____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <u>\$38,560.48</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.13	Nonpriority creditor's name and mailing address ASC Air St P O BOX 986 Stafford, TX 77497 Date or dates debt was incurred _____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <u>\$424.33</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.13	Nonpriority creditor's name and mailing address Aubaine Supply PO Box 727 Giddings, TX 78942 Date or dates debt was incurred _____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <u>\$2,287.58</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.14	Nonpriority creditor's name and mailing address Banner Life Insurance Company 3275 Bennett Creek Avenue Frederick, MD 21704 Date or dates debt was incurred _____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <u>\$637.88</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

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3.15	Nonpriority creditor's name and mailing address Bayou City P O Box 330264 Houston, TX Date or dates debt was incurred _____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <u>\$144.72</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.16	Nonpriority creditor's name and mailing address Best Line 2582 Gateway Drive State College, PA 16801 Date or dates debt was incurred _____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <u>\$1,062.97</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.17	Nonpriority creditor's name and mailing address BK Power S 6812 Bourgeois Blvd. Houston, TX 77011 Date or dates debt was incurred _____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <u>\$25,861.07</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.18	Nonpriority creditor's name and mailing address Blackhawk Crane & Rig P O Box 662 Gillette, WY 82717 Date or dates debt was incurred _____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <u>\$24,558.66</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.19	Nonpriority creditor's name and mailing address Blue Cross Blue Shield of Texas 14800 Frye Road 2nd Floor Fort Worth, TX 76155 Date or dates debt was incurred _____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <u>\$40,617.48</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

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3.20	Nonpriority creditor's name and mailing address Blueline Rental P O Box 840062 Dallas, TX 75284 Date or dates debt was incurred _____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <u>\$3,355.87</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.21	Nonpriority creditor's name and mailing address Bosworth Investment Group P O Box 52154 Midland, TX 79710 Date or dates debt was incurred _____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <u>\$9,465.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.22	Nonpriority creditor's name and mailing address Boxx Modul 3475 High River Road Fort Worth, TX 76155 Date or dates debt was incurred _____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <u>\$11,808.45</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.23	Nonpriority creditor's name and mailing address Burford, Sheryl A. 11714 Idlebrook Drive Houston, TX 77070 Date or dates debt was incurred _____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <u>\$36,703.75</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.24	Nonpriority creditor's name and mailing address Cam Process Tech 11757 Katy Freeway Suite 1120 Houston, TX 77079 Date or dates debt was incurred _____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <u>\$33,876.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

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3.25	Nonpriority creditor's name and mailing address Cannonball Trucking <hr/> P O Box 262523 <hr/> Houston, TX 77207 <hr/> Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <u>\$1,405.50</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.26	Nonpriority creditor's name and mailing address CDR Strainers & Filters <hr/> 279 Oil Field Road <hr/> Bellville, TX 77418 <hr/> Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <u>\$7,596.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.27	Nonpriority creditor's name and mailing address Central Power Systems <hr/> 9200 Liberty Drive <hr/> Liberty, MO 64068 <hr/> Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <u>\$3,500.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.28	Nonpriority creditor's name and mailing address Champion Fastener & Industrial <hr/> 10624 Tower Oaks Blvd. <hr/> Houston, TX 77070 <hr/> Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <u>\$9,045.16</u> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.29	Nonpriority creditor's name and mailing address Cintas <hr/> P O Box 650838 <hr/> Dallas, TX 75265-0838 <hr/> Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <u>\$7,035.82</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

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3.30	Nonpriority creditor's name and mailing address Compass Compression <hr/> 16135 Preston Road 304 <hr/> Dallas, TX 75248 <hr/> Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <u>\$57,222.33</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.31	Nonpriority creditor's name and mailing address CPI Intern <hr/> 4323 Green Briar Drive <hr/> Stafford, TX 77477 <hr/> Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <u>\$1,209.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.32	Nonpriority creditor's name and mailing address Crane Masters Inc <hr/> P O BOX 1147 <hr/> Houston, TX 77093 <hr/> Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <u>\$18,875.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes
3.33	Nonpriority creditor's name and mailing address Crane Rental Division <hr/> 5902 Allison Road <hr/> Houston, TX 77048 <hr/> Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <u>\$4,520.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.34	Nonpriority creditor's name and mailing address CSI Compression <hr/> 24955 I-45 North <hr/> Spring, TX 77380 <hr/> Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <u>\$30,737.11</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

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3.35	Nonpriority creditor's name and mailing address CUATES <hr/> 817 Columbus Road <hr/> Sealy, TX 77474 <hr/> Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <u>\$101,159.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.36	Nonpriority creditor's name and mailing address Cyclone Bolt & Gasket <hr/> 5246 N. Sam Houston Parkway E, <hr/> Houston, TX 77032 <hr/> Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <u>\$1,632.36</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.37	Nonpriority creditor's name and mailing address De Lage Landen <hr/> P O Box 41602 <hr/> Philadelphia, PA 19101-1602 <hr/> Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <u>\$1,032.15</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.38	Nonpriority creditor's name and mailing address DX Electric <hr/> P O Box 140005 <hr/> Irving, TX 75014 <hr/> Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <u>\$8,837.67</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.39	Nonpriority creditor's name and mailing address Elliott Electric <hr/> 1550 Wilson Rd. <hr/> Humble, TX 77338 <hr/> Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <u>\$8,601.36</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

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3.40	Nonpriority creditor's name and mailing address Enginuity P O Box 420 Livingston, TX 77351 Date or dates debt was incurred _____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <u>\$1,940.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.41	Nonpriority creditor's name and mailing address English, Ernie 8710 Wyndham Village Dr Jersey Vlg, TX 77040-1144 Date or dates debt was incurred _____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <u>\$11,156.28</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.42	Nonpriority creditor's name and mailing address ERS Rental 4318 Bluebonnet Drive Houston, TX 77053 Date or dates debt was incurred _____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <u>\$49,684.60</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.43	Nonpriority creditor's name and mailing address Exterran P O Box 201160 Dallas, TX 75320 Date or dates debt was incurred _____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <u>\$10,560.48</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.44	Nonpriority creditor's name and mailing address Farnam Street Financial 5850 Opus Parkway Hopkins, MN 55343 Date or dates debt was incurred _____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <u>\$702,997.84</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

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3.45	Nonpriority creditor's name and mailing address FW Gartner <hr/> 25 Southbelt Industrial Drive <hr/> Houston, TX 77047 <hr/> Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <u>\$9,590.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.46	Nonpriority creditor's name and mailing address FW Murphy/Econtrols <hr/> 4646 S. Harvard Avenue <hr/> Tulsa, OK 74135 <hr/> Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <u>\$32,254.29</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.47	Nonpriority creditor's name and mailing address G & A Fabr <hr/> 6200 E. Hwy 80 <hr/> Midland, TX 79706 <hr/> Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <u>\$13,551.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.48	Nonpriority creditor's name and mailing address Geophysical Technology Inc <hr/> 800 Mulberry Ln <hr/> Bellaire, TX 77401 <hr/> Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <u>\$44,433.77</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.49	Nonpriority creditor's name and mailing address Global Compression Partners LLC <hr/> P O Box 12486 <hr/> San Antonio, TX 78212 <hr/> Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <u>\$2,000.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

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3.50	Nonpriority creditor's name and mailing address Global HEA 14446 Smith Road Humble, TX 77396 Date or dates debt was incurred _____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <u>\$176,992.56</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.51	Nonpriority creditor's name and mailing address Global Power/Utah Gas 1415 N. Loop W. Suite 1250 Houston, TX 77008 Date or dates debt was incurred _____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <u>\$391,800.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.52	Nonpriority creditor's name and mailing address Graybar 12753 Collections Center Drive Chicago, IL 60693-2753 Date or dates debt was incurred _____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <u>\$1,956.70</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.53	Nonpriority creditor's name and mailing address Guntner 110 W. Hillcrest Blvd. 105 Schaumburg, IL 60195 Date or dates debt was incurred _____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <u>\$39,294.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.54	Nonpriority creditor's name and mailing address Harris County Tax Assessor 1001 Preston Houston, TX 77002 Date or dates debt was incurred _____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <u>\$59,924.66</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

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3.55	Nonpriority creditor's name and mailing address Hi Tork PO 1330 Shrub Oak League City, TX 77573 Date or dates debt was incurred _____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <u>\$2,124.27</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.56	Nonpriority creditor's name and mailing address Higginbotham Insurance Agency 500 W.13th Street Fort Worth, TX 76101 Date or dates debt was incurred _____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <u>\$177,490.67</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.57	Nonpriority creditor's name and mailing address HISD/County Humble ISD P O Box 4020 Houston, TX 77210 Date or dates debt was incurred _____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <u>\$55,991.41</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.58	Nonpriority creditor's name and mailing address Holcomb Environmental 4311 RV Mayfield Drive Houston, TX 77088 Date or dates debt was incurred _____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <u>\$16,511.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.59	Nonpriority creditor's name and mailing address Houston Inspection Services 14403 East Freeway A Houston, TX 77015 Date or dates debt was incurred _____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <u>\$6,470.25</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

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3.60	Nonpriority creditor's name and mailing address Houston WE <hr/> 11001 Wallisville Road <hr/> Houston, TX 77013 <hr/> Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <u>\$2,572.29</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.61	Nonpriority creditor's name and mailing address Humble ISD <hr/> P O Box 4020 <hr/> Houston, TX 77210 <hr/> Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <u>\$42,236.07</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.62	Nonpriority creditor's name and mailing address HYTORC of Texas <hr/> 12420 Texaco Road <hr/> Houston, TX 77013 <hr/> Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <u>\$4,170.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.63	Nonpriority creditor's name and mailing address ICS-Innovative Control System <hr/> 1500 Precision Drive Suite 150 <hr/> Plano, TX 75074 <hr/> Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <u>\$9,412.95</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.64	Nonpriority creditor's name and mailing address IND Compressor Services <hr/> 1314 W. Sam Houston Parkway North <hr/> Houston, TX 77043 <hr/> Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <u>\$4,890.57</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

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3.65	Nonpriority creditor's name and mailing address Infratel Communications P O Box 91003 Houston, TX 77291 Date or dates debt was incurred _____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <u>\$1,786.18</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.66	Nonpriority creditor's name and mailing address IPD P O Box 3008 Los Angeles, CA 90030 Date or dates debt was incurred _____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <u>\$7,000.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.67	Nonpriority creditor's name and mailing address Jetspecia 211 Market Boerne, TX 78006 Date or dates debt was incurred _____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <u>\$2,403.92</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.68	Nonpriority creditor's name and mailing address KUTEK ROCK LLPLP P O Box 30057 Omaha, NE 68103 Date or dates debt was incurred _____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <u>\$20,634.34</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.69	Nonpriority creditor's name and mailing address LA Energy P O Box 9897 New Iberia, LA 70562 Date or dates debt was incurred _____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <u>\$5,752.51</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

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3.70	Nonpriority creditor's name and mailing address Litt Logistics P O Box 1106 Huffman, TX 77336-1106 Date or dates debt was incurred _____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <u>\$9,800.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.71	Nonpriority creditor's name and mailing address Loaded DIC P O Box 13627 Odessa, TX 79768 Date or dates debt was incurred _____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <u>\$1,296.43</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.72	Nonpriority creditor's name and mailing address M & J Valve P O Box 3307 Lafayette, LA 70502 Date or dates debt was incurred _____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <u>\$120,505.33</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.73	Nonpriority creditor's name and mailing address M & P Flange 9426 Katy Freeway Bldg 11 Houston, TX 77055 Date or dates debt was incurred _____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <u>\$615.09</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.74	Nonpriority creditor's name and mailing address Millcorp Industrial Supply P O Box 10266 Corpus Christi, TX 78409 Date or dates debt was incurred _____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <u>\$1,853.69</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

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3.75	Nonpriority creditor's name and mailing address Miller Engineers <hr/> 7705 E. Highway 90 <hr/> Jeanerette, LA 70544 <hr/> Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: \$3,086.00 <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.76	Nonpriority creditor's name and mailing address Mitrowski Welding <hr/> 1315 College Avenue <hr/> South Houston, TX 77587 <hr/> Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: \$2,165.01 <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.77	Nonpriority creditor's name and mailing address MP Security <hr/> 1102 Houston Street <hr/> Conroe, TX 77301 <hr/> Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: \$11,758.05 <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.78	Nonpriority creditor's name and mailing address MSI Supply <hr/> 108 Hirsch Road <hr/> Houston, TX 77020 <hr/> Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: \$23,102.60 <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.79	Nonpriority creditor's name and mailing address Mustang CA <hr/> P O Box 1373 <hr/> Houston, TX 77251-1373 <hr/> Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: \$40,876.35 <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

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3.80	Nonpriority creditor's name and mailing address NFR Global, LLC <hr/> 8871 Ridgeline Blvd. Suite 250 <hr/> Littleton, CO 80129 <hr/> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <u>\$82,324.58</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.81	Nonpriority creditor's name and mailing address Norris, Matt <hr/> 15715 Ladino Run Street <hr/> Cypress, TX 77429 <hr/> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <u>\$28,170.32</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes
3.82	Nonpriority creditor's name and mailing address North Houston Valve <hr/> 27228 E. Hardy Road <hr/> Spring, TX 77373 <hr/> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <u>\$44,741.74</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.83	Nonpriority creditor's name and mailing address Northside Welding <hr/> 13322 Hillside Drive <hr/> Houston, TX 77030 <hr/> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <u>\$6,292.27</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.84	Nonpriority creditor's name and mailing address OW Excel Oilfield Equipment <hr/> 13227 Chrisman Rd <hr/> Houston, TX 77039-4121 <hr/> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <u>\$1,500.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

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3.85	Nonpriority creditor's name and mailing address <u>Peerless Dynamics</u> <u>1802 Cloud Croft Drive</u> <u>Friendswood, TX 77546</u> Date or dates debt was incurred _____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <u>\$13,600.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3	Nonpriority creditor's name and mailing address <u>Pena, Jeff</u> <u>1255 North Eddie</u> <u>Odessa, TX 79763</u> Date or dates debt was incurred _____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <u>\$5,537.95</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.87	Nonpriority creditor's name and mailing address <u>Petronyx</u> <u>3501 N. Causeway Blvd. Suite 210</u> <u>Metairie, LA 70002</u> Date or dates debt was incurred _____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <u>\$3,300.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.88	Nonpriority creditor's name and mailing address <u>Phoenix Mechanical Integrity</u> <u>P O BOX 645</u> <u>Dover, TN 37058</u> Date or dates debt was incurred _____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <u>\$854.50</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.89	Nonpriority creditor's name and mailing address <u>Power Solutions</u> <u>201 Mittel Drive</u> <u>Wood Dale, IL 60191</u> Date or dates debt was incurred _____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <u>\$9,050.43</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

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3.90	Nonpriority creditor's name and mailing address Powershift Generation <hr/> 35 Charlton Avenue <hr/> Blackfalds Alberta, Canada, <hr/> Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <u>\$14,833.45</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.91	Nonpriority creditor's name and mailing address Powertherm <hr/> 7420 Wright Road <hr/> Houston, TX 77041 <hr/> Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <u>\$20,635.25</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.92	Nonpriority creditor's name and mailing address Praxair <hr/> 6620 Fairbanks N. Houston Road <hr/> Houston, TX 77040 <hr/> Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <u>\$1,226.50</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.93	Nonpriority creditor's name and mailing address Principal Life Insurance Company <hr/> P O Box 10372 <hr/> Des Moines, IA 50306 <hr/> Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <u>\$90,650.46</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.94	Nonpriority creditor's name and mailing address Puffer Sweiven <hr/> P O B0x 301124 <hr/> Dallas, TX 75303-1124 <hr/> Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <u>\$11,111.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

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3.95	Nonpriority creditor's name and mailing address Pyron Expr 2712 Roger Avenue Odessa, TX 79762 Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <u>\$400.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.96	Nonpriority creditor's name and mailing address Queen Funding LLC 2221 NE 164 St 1144 North Miami Beach, FL 33160 Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <u>\$148,000.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.97	Nonpriority creditor's name and mailing address Quest -Tec 13960 S. Wayside Drive Houston, TX 77048 Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <u>\$6,294.70</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.98	Nonpriority creditor's name and mailing address RED-D-ARC welding 1817 Federal Road Houston, TX 77015 Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <u>\$2,768.05</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.99	Nonpriority creditor's name and mailing address Richard P. Brown 1911 Mossback Circle Fresno, TX 77545 Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <u>\$6,222.02</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

\$3,636.14

Last 4 digits of account number

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3.105	Nonpriority creditor's name and mailing address Santini Ex P O Box 15275 Houston, TX 77220 Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <u>\$2,280.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.106	Nonpriority creditor's name and mailing address Select Environmental P O Box 732711 Dallas, TX 75373 Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <u>\$5,850.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.107	Nonpriority creditor's name and mailing address Service Steel P O Box 9607 Houston, TX 77213 Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <u>\$2,007.72</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.108	Nonpriority creditor's name and mailing address Sherwin Williams 3103 A FM 1960 W. Humble, TX 77338 Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <u>\$7,017.07</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.109	Nonpriority creditor's name and mailing address Smith Road Lot 6, LP 7720 Westview Drive Houston, TX 77055-5029 Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <u>\$125,249.93</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

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3.110	Nonpriority creditor's name and mailing address Southern Transport <hr/> P O Box 1550 <hr/> Kilgore, TX 75663 <hr/> Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <u>\$128,500.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.111	Nonpriority creditor's name and mailing address Spitz, Bill <hr/> 11530 Brittmore Park Drive <hr/> Houston, TX 77041 <hr/> Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <u>\$2,129.83</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.112	Nonpriority creditor's name and mailing address Spring Gas <hr/> 9337 Spring Cypress Road <hr/> Houston, TX 77073 <hr/> Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <u>\$28,572.26</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.113	Nonpriority creditor's name and mailing address Spring Gas Compression <hr/> 9337 Spring Cypress Rd. Suite A <hr/> Spring, TX 77379 <hr/> Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <u>\$37,158.55</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.114	Nonpriority creditor's name and mailing address SST Security Transport <hr/> 14601 S. Memorial Drive <hr/> Bixby, OK 74008 <hr/> Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <u>\$145,500.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

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3.115	Nonpriority creditor's name and mailing address ST South T <hr/> P O Box 7616 <hr/> Victoria, TX 77903 <hr/> Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <u>\$1,624.70</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.116	Nonpriority creditor's name and mailing address Steel Supply <hr/> 10600 Telephone Road <hr/> Houston, TX 77075 <hr/> Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <u>\$30,274.91</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.117	Nonpriority creditor's name and mailing address Stone Trucking <hr/> P O Box 700 <hr/> Kiefer, OK 74041 <hr/> Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <u>\$1,500.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.118	Nonpriority creditor's name and mailing address Stuart Hos <hr/> 4851 Homestead Road <hr/> Houston, TX 77028 <hr/> Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <u>\$13,950.07</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.119	Nonpriority creditor's name and mailing address Sullivan, Mike <hr/> P O Box 4622 <hr/> Houston, TX 77210 <hr/> Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <u>\$22,436.70</u> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

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3.120	Nonpriority creditor's name and mailing address Sunbelt Rental <hr/> P O Box 409211 <hr/> Atlanta, GA 30384 <hr/> Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <u>\$1,404.92</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.121	Nonpriority creditor's name and mailing address Sundance F <hr/> P O Box 2495 <hr/> Spring, TX 77383 <hr/> Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <u>\$7,017.54</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.122	Nonpriority creditor's name and mailing address TB Woods <hr/> 440 N. Fifth Avenue <hr/> Chambersburg, PA 17201 <hr/> Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <u>\$996.14</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.123	Nonpriority creditor's name and mailing address TCA Capital <hr/> 777 Third Avenue Suite 17A <hr/> New York, NY 10017 <hr/> Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <u>\$1,000,000.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.124	Nonpriority creditor's name and mailing address Texas Mutal Insurance Company <hr/> P O Box 841843 <hr/> Dallas, TX 75284-1843 <hr/> Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <u>\$14,058.35</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

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3	Nonpriority creditor's name and mailing address The Eads <hr/> 13843 Promenade Blvd 100 <hr/> Stafford, TX 77477 <hr/> Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <u>\$5,800.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.126	Nonpriority creditor's name and mailing address The Savino Group <hr/> 1810 W. 25th Street <hr/> Houston, TX 77008 <hr/> Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <u>\$19,900.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.127	Nonpriority creditor's name and mailing address Torc Engineering <hr/> 3931 N. Garner Lake Road <hr/> Gillette, WY 82716 <hr/> Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <u>\$21,752.13</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.128	Nonpriority creditor's name and mailing address Torres, Joe <hr/> P O Box 842623 <hr/> Houston, TX 77084 <hr/> Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <u>\$7,000.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.129	Nonpriority creditor's name and mailing address Travelers Insurance <hr/> P O Box 660317 <hr/> Dallas, TX 75266-0317 <hr/> Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <u>\$32,530.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

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3.130	Nonpriority creditor's name and mailing address TRF Energy 21315 W. Hardy Houston, TX 77073 Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$130,000.00
3.131	Nonpriority creditor's name and mailing address Trio Fab In 6515 Carson Road Houston, TX 77048 Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$65,475.00
3.132	Nonpriority creditor's name and mailing address Truespec 14107 Interdrive W. Houston, TX 77032 Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$10,431.90
3.133	Nonpriority creditor's name and mailing address TSC Logist 111 Founders Drive Suite 300 Baton Rouge, LA 70810 Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$21,500.00
3.134	Nonpriority creditor's name and mailing address United Vis P O Box 975357 Dallas, TX 75397-5357 Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$3,178.75

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3.135	Nonpriority creditor's name and mailing address UPS Shipping 55 Glenlake Parkway NE Atlanta, GA 30328 Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,014.95
3.136	Nonpriority creditor's name and mailing address UR-United P O Box 840514 Dallas, TX 75284-0514 Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$16,079.84
3.137	Nonpriority creditor's name and mailing address USA Industrial 302 State Street South Houston, TX 77587 Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$148.28
3.138	Nonpriority creditor's name and mailing address WEG Electric 6655 Sugarloaf Parkway Duluth, GA 30097 Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$12,188.89
3.139	Nonpriority creditor's name and mailing address Westair Praxair Distribution, Inc P O BOX 120889 Dallas, TX 75312-0889 Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$524.36

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3.140	Nonpriority creditor's name and mailing address WF Steel <hr/> P O Box 670563 <hr/> White Oak, TX 75693 <hr/> Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <u>\$21,937.50</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.141	Nonpriority creditor's name and mailing address White Oak Radiator <hr/> P O Box 606 <hr/> White Oak, TX 75693 <hr/> Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <u>\$9,658.88</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.142	Nonpriority creditor's name and mailing address Who The Greeks Call, LLC <hr/> P O Box 80933 <hr/> Midland, TX 79708 <hr/> Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <u>\$5,044.28</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Part 3: List Others to Be Notified About Unsecured Claims

- 4. List in alphabetical order any others who must be notified for claims listed in Parts 1 and 2.** Examples of entities that may be listed are collection agencies, assignees of claims listed above, and attorneys for unsecured creditors.

If no others need to be notified for the debts listed in Parts 1 and 2, do not fill out or submit this page. If additional pages are needed, copy the next page.

	Name and mailing address	On which line in Part 1 or Part 2 is the related creditor (if any) listed?	Last 4 digits of account number, if any
4.1	Freedman & Price, P.C. 1102 West Avenue Suite 200 Austin, TX 78701	Line <u>3.5</u> <input type="checkbox"/> Not listed. Explain _____	_____
4.2	The Yoes Law , LLP 3535 Calder Avenue Suite 235 Beaumont, TX 77726	Line <u>3.17</u> <input type="checkbox"/> Not listed. Explain _____	_____
4.3	Crowley Fleck PLLP 10 West Brundage Street Sheridan, WY 82801	Line <u>3.18</u> <input type="checkbox"/> Not listed. Explain _____	_____
4.4	Matthews, Shiels, Knott, Eden, Davis & Beanland, L.L.P. 8131 LBJ Freeway Suite 700 Dallas, TX 75251	Line <u>3.39</u> <input type="checkbox"/> Not listed. Explain _____	_____
4.5	Small Claims Court Precinct 3, Place 2 Baytown, TX 77521	Line <u>3.70</u> <input type="checkbox"/> Not listed. Explain _____	_____
4.6	Thomas M. Long, P.C. 412 Travis Street Suite C Lafayette, LA 70503	Line <u>3.72</u> <input type="checkbox"/> Not listed. Explain _____	_____
4.7	Adair, Morris & Osborn 325 N. St. Paul St. Suite 4100 Dallas, TX 75201	Line <u>3.108</u> <input type="checkbox"/> Not listed. Explain _____	_____
4.8	Schoeppl Law, P.A. 4651 North Federal Highway Boca Raton, FL 33431	Line <u>3.123</u> <input type="checkbox"/> Not listed. Explain _____	_____
4.9	Snow Spence Green, LLP 2929 Allen Parkway Suite 2800 Houston, TX 77019	Line <u>3.51</u> <input type="checkbox"/> Not listed. Explain _____	_____
4.10	JGB Law 3262 Westheimer Suite 651 Houston, TX 77098	Line <u>3.113</u> <input type="checkbox"/> Not listed. Explain _____	_____
4.11	Anderson, Lehrman, Barre & Maraist, LLP Gaslight Square 1001 Third St. Suite 1 Corpus Christi, TX 78404	Line <u>3.12</u> <input type="checkbox"/> Not listed. Explain _____	_____

Part 3:

Additional Page

4.12	<div>Perdue, Brandon, Fielder, Collins & Mott, L.L.P.</div> <div>1235 North Loop West Suite 600</div> <div>Houston, TX 77008</div>	Line <u>357</u>	<div><input type="checkbox"/> Not listed. Explain _____</div> <div>_____</div>
4.13	<div>Justice of the Peace</div> <div>300 N. Grant Room 208</div> <div>Odessa, TX 79761</div>	Line <u>3</u>	<div><input type="checkbox"/> Not listed. Explain _____</div> <div>_____</div>

Part 4: Total Amounts of the Priority and Nonpriority Unsecured Claims

5. Add the amounts of priority and nonpriority unsecured claims.

Total of claim amounts

5a. Total claims from Part 1	5a.		<u>\$29,152.95</u>
5b. Total claims from Part 2	5b.	+	<u>\$5,265,740.36</u>
5c. Total of Parts 1 and 2 Lines 5a + 5b = 5c.	5c.		<u>\$5,294,893.31</u>

United States Bankruptcy Court

Southern District of Texas

In re

Compression Generation Services, LLC

Case No. _____

Debtor(s)Chapter 11**DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR**

1. Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the above named debtor(s) and that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows:

For legal services, I have agreed to accept	\$25,000.00
Prior to the filing of this statement I have received	\$25,000.00
Balance Due	\$0.00

2. The source of the compensation to be paid to me was:

☒ Debtor ☐ Other (specify)

3. The source of compensation to be paid to me is:

☒ Debtor ☐ Other (specify)

4. ☐ I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm.

☒ I have agreed to share the above-disclosed compensation with another person or persons who are not members or associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation, is attached.

*** Debtor is being charged \$300.00 an hour, subject to court approval.

5. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:

- a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy;
- b. Preparation and filing of any petition, schedules, statements of affairs and plan which may be required;
- c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof;

6. By agreement with the debtor(s), the above-disclosed fee does not include the following services:

CERTIFICATION

I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.

07/03/2019

Date

/s/ Jessica Hoff

Signature of Attorney

Hoff Law Offices, P.C.

Name of law firm

IN THE UNITED STATES BANKRUPTCY COURT
SOUTHERN DISTRICT OF TEXAS
HOUSTON DIVISION

IN RE: **Compression Generation Services, LLC**

CASE NO

CHAPTER 11

VERIFICATION OF CREDITOR MATRIX

The above named Debtor hereby verifies that the attached list of creditors is true and correct to the best of his/her knowledge.

Date 07/03/2019 Signature /s/ John Peter Pauk
John Peter Pauk, President

3D Network Solutions
P O Box 821113
Humble, TX 77396

A.M.M.R. S-Advanced
Machine
1441 Luthe Road 106
Houston, TX 77039

AC ARS OPER
P O BOX 2634
Cypress, TX 77410

Accutrol Exterminating
11842 Plum Meadow Lane
Houston, TX 77039

ACI Services
125 Steubenville Avenue
Cambridge, OH 43725

Action Supply
5513 Noments
Houston, TX 77039

Adair, Morris & Osborn
325 N. St. Paul St. Suite 4100
Dallas, TX 75201

Alfa Laval
5400 International Trade Drive
Henrico, VA 23231

Ally Finacial
PO Box 9001948
Louisville, KY 40290-1948

American Welding & Gas Inc.
9
4900 Falls of Neuse Rd. Suite 150
Raleigh, NC 27609

Ample Comp
1929 - 65 Street NW

Anderson, Lehrman, Barre &
Maraist, LLP
Gaslight Square
1001 Third St. Suite 1
Corpus Christi, TX 78404

Apache Oil
P O Box 177
Pasadena, TX 77501

Applied In
10633 W. Little York 250
Houston, TX 77041

Archrock Services
9807 Katy Freeway Suite 100
Houston, TX 77024

ASC Air St
P O BOX 986
Stafford, TX 77497

Aubaine Supply

PO Box 727

Giddings, TX 78942

Banner Life Insurance
Company

3275 Bennett Creek Avenue

Frederick, MD 21704

Bayou City

P O Box 330264

Houston, TX

Best Line

2582 Gateway Drive

State College, PA 16801

BK Power S

6812 Bourgeois Blvd.

Houston, TX 77011

Blackhawk Crane & Rig

P O Box 662

Gillette, WY 82717

Blue Cross Blue Shield of
Texas

14800 Frye Road 2nd Floor

Fort Worth, TX 76155

Blueline Rental

P O Box 840062

Dallas, TX 75284

Bosworth Investment Group
P O Box 52154
Midland, TX 79710

Boxx Modul
3475 High River Road
Fort Worth, TX 76155

Sheryl A. Burford
11714 Idlebrook Drive
Houston, TX 77070

Cam Process Tech
11757 Katy Freeway Suite 1120
Houston, TX 77079

Cannonball Trucking
P O Box 262523
Houston, TX 77207

Capacity Funding LLC
7 Renaissance Square 5th Floor
White Plains, NY 10601

CDR Strainers & Filters
279 Oil Field Road
Bellville, TX 77418

Central Power Systems
9200 Liberty Drive
Liberty, MO 64068

Champion Fastener &
Industrial

10624 Tower Oaks Blvd.
Houston, TX 77070

Cintas

P O Box 650838
Dallas, TX 75265-0838

Compass Compression

16135 Preston Road 304
Dallas, TX 75248

Comptroler of Public
Accounts

P O Box 149354
Austin, TX 78714-9354

Cool Cow

28439 Champions Ridge
Magnolia, TX 77354

CPI Intern

4323 Green Briar Drive
Stafford, TX 77477

Crane Masters Inc

P O BOX 1147
Houston, TX 77093

Crane Rental Division

5902 Allison Road
Houston, TX 77048

Crowley Fleck PLLP
10 West Brundage Street
Sheridan, WY 82801

CSI Compression
24955 I-45 North
Spring, TX 77380

CUATES
817 Columbus Road
Sealy, TX 77474

Cyclone Bolt & Gasket
5246 N. Sam Houston Parkway E,
Houston, TX 77032

De Lage Landen
P O Box 41602
Philadelphia, PA 19101-1602

DX Electric
P O Box 140005
Irving, TX 75014

Elliott Electric
1550 Wilson Rd.
Humble, TX 77338

Enginuitey
P O Box 420
Livingston, TX 77351

Ernie English
8710 Wyndham Village Dr
Jersey Vlg, TX 77040-1144

ERS Rental
4318 Bluebonnet Drive
Houston, TX 77053

Exterran
P O Box 201160
Dallas, TX 75320

Farnam Street Financial
240 Pondview Plaza
5850 Opus Parkway
Hopkins, MN 55343

Farnam Street Financial
5850 Opus Parkway
Hopkins, MN 55343

FlowCapital/Grenville
1 Adelaide Street East Suite 3002
Toronto, Ontario, Canada ON M5C 2V9

Freedman & Price, P.C.
1102 West Avenue Suite 200
Austin, TX 78701

FW Gartner
25 Southbelt Industrial Drive
Houston, TX 77047

FW Murphy/Econtrols
4646 S. Harvard Avenue
Tulsa, OK 74135

G & A Fabr
6200 E. Hwy 80
Midland, TX 79706

Geophysical Technology Inc
800 Mulberry Ln
Bellaire, TX 77401

Global Compression Partners
LLC
P O Box 12486
San Antonio, TX 78212

Global HEA
14446 Smith Road
Humble, TX 77396

Global Power/Utah Gas
1415 N. Loop W. Suite 1250
Houston, TX 77008

Graybar
12753 Collections Center Drive
Chicago, IL 60693-2753

Guntner
110 W. Hillcrest Blvd. 105
Schaumburg, IL 60195

Harris County Tax Assessor
1001 Preston
Houston, TX 77002

Hi Tork PO
1330 Shrub Oak
League City, TX 77573

Higginbotham Insurance
Agency
500 W.13th Street
Fort Worth, TX 76101

HISD/County
Humble ISD
P O Box 4020
Houston, TX 77210

Hoff Law Offices, P.C.
1322 Space Park Drive B-128
Houston, TX 77058

Holcomb Environmental
4311 RV Mayfield Drive
Houston, TX 77088

Houston Inspection Services
14403 East Freeway A
Houston, TX 77015

Houston WE
11001 Wallisville Road
Houston, TX 77013

Humble I SD
P O Box 4020
Houston, TX 77210

HYTORC of Texas
12420 Texaco Road
Houston, TX 77013

IAH/AIM Corporate
27523 Morton Rd
Katy, TX 77493

ICS-Innovative Control
System
1500 Precision Drive Suite 150
Plano, TX 75074

IND Compressor Services
1314 W. Sam Houston Parkway North
Houston, TX 77043

Industrial
Supply/Dissolvalloy
21750 E Martin Drive
Porter, TX 77365

Infratel Communications
P O Box 91003
Houston, TX 77291

Internal Revenue Service
Centralized Insolvency Operations
PO Box 7346
Philadelphia, PA 19101-7346

I PD
P O Box 3008
Los Angeles, CA 90030

I RS
Ogden, UT

Jetspecia
211 Market
Boerne, TX 78006

JGB Law
3262 Westheimer Suite 651
Houston, TX 77098

Justice of the Peace
300 N. Grant Room 208
Odessa, TX 79761

Kabbage
PO Box 77081
Atlanta, GA 30357

King Hardy
90 Wilson Rd
Humble, TX 77338

KUTEK ROCK LLPLP
P O Box 30057
Omaha, NE 68103

LA Energy
P O Box 9897
New Iberia, LA 70562

Litt Logistics
P O Box 1106
Huffman, TX 77336-1106

Loaded D I C
P O Box 13627
Odessa, TX 79768

M & P Flange
9426 Katy Freeway Bldg 11
Houston, TX 77055

Matthews, Shiels, Knott,
Eden, Davis & Beanland,
L.L.P.
8131 LBJ Freeway Suite 700
Dallas, TX 75251

Millcorp Industrial Supply
P O Box 10266
Corpus Christi, TX 78409

Miller Engineers
7705 E. Highway 90
Jeanerette, LA 70544

Mitrowski Welding
1315 College Avenue
South Houston, TX 77587

MP Security
1102 Houston Street
Conroe, TX 77301

MSI Supply
108 Hirsch Road
Houston, TX 77020

Mustang CA
P O Box 1373
Houston, TX 77251-1373

NFR Global, LLC
8871 Ridgeline Blvd. Suite 250
Littleton, CO 80129

Matt Norris
15715 Ladino Run Street
Cypress, TX 77429

North Houston Valve
27228 E. Hardy Road
Spring, TX 77373

Northside Welding
13322 Hillside Drive
Houston, TX 77030

OW Excel Oildfield Equipment
13227 Chrisman Rd
Houston, TX 77039-4121

Peerless Dynamics
1802 Cloud Croft Drive
Friendswood, TX 77546

Jeff Pena
1255 North Eddie
Odessa, TX 79763

Perdue, Brandon, Fielder,
Collins & Mott, L.L.P.
1235 North Loop West Suite 600
Houston, TX 77008

Petronyx
3501 N. Causeway Blvd. Suite 210
Metairie, LA 70002

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